

# Meeting Minutes

**Meeting Name:** Data Synthesis Workgroup

**Date and Time:** Tuesday, February 14, 2006  
2:30 – 4:30 pm

**Location:** MPHI Interactive Learning Center, Room B, Okemos

**Present:** Beth Ainsworth, Umbrin Ateequi, Elaine Beane, Janette Davis, Cathy Maxwell, Robert Mosher, Ellen Speckman-Randall, Bob Stampfly, DeAnna Warren, Betsy Wasilevich, Carolyn Wiener

## Minutes

Topic	Discussion	Results
Update from Elaine Beane on the work of the Models Development Workgroup (MDWG) and the Advisory Council.	<p>MDCH Staff have been very busy developing and editing documents for the Advisory Council.</p> <p>At the last Advisory Council meeting on February 8, 2006, there was a presentation and discussion of the Michigan First Healthcare Plan, announced during the Governor's State of the State Address on January 25, 2006.</p> <p>The MDWG has completed the compilation of the various options that the subgroups had proposed, developing a time stratified plan for achieving 100% health insurance coverage for Michigan residents. This is the finalized "Getting from Here to There" document.</p>	The next Advisory Council Meeting is scheduled for February 22, 2006. DSWG members are welcome to attend, and were asked to rsvp to MDCH staff if plan on attending. The Advisory Council will be given the opportunity to react to the "Getting from Here to There" plan, submitted by the MDWG.
Current Status of the Household Survey Report – Final Draft, the Employer Survey Report, and the Focus Groups Report.	<p>The 2005 Michigan Household Health Insurance Survey (MHHIS) Report is now in Final Draft; copies of the first 51 pages were distributed to DSWG members and Elaine Beane provided a brief review. Rates of uninsurance vary, depending on if one uses data from this Household Survey, or Current Population Survey (CPS) data. This is because the two surveys ask the question differently. The Household Survey asks: "Are you uninsured at this point in time?" The Current Population Survey, or CPS, asks, "Have you been uninsured for the</p>	<p>The Household Survey will provide the State Planning Project with its primary data source for understanding the uninsured in Michigan. It will be placed on the SPG webpage.</p> <p>First draft of the Employer Survey Report was submitted by MPHI to MDCH staff on January 6, 2006. MDCH edits and changes have been incorporated in the final draft due to MDCH by the end of February.</p> <p>Focus Groups were conducted by MPHI for the uninsured,</p>

	<p>entire previous year?" Other data sources describing rates of uninsurance include the Michigan Behavioral Risk Factor Survey (BRFS), the National Survey on Children's Health, and the National Health Interview Survey (NHIS).</p> <p>It was noted that the 2004 BRFS report has been published. DSWG members wondered if we should be updating the MHHIS report with the 2004 information from the BRFS.</p>	<p>employers, and insurance agents. The draft report of the findings from the Focus Groups is currently in revision and will be submitted to MDCH by the end of February.</p>
<p>Discussion of Health Care Safety Net Profile Data Elements and Decisions</p>	<p>A briefing paper on the safety net was recently developed by MDCH staff in response to the Advisory Council's request for a description of safety net service programs and initiative, current capacity, and future outlook. DSWG members had the opportunity to review this paper, and provided comments to enhance the document.</p> <p>The group engaged in considerable discussion about the inclusion of health status indicators in the health care safety net scan for Michigan. Between 10 to 15 indicators will be selected as the most useful descriptive measures for the safety net scan. The Kaiser State Health Facts were used as a guide for identifying indicators for a safety net review. The group agreed to tie those indicators and measurement of impact to preventive services and chronic disease management. Examples of suggested indicators included: Infant Mortality, Prenatal Care, Years of Productive Life Lost/Life Expectancy, Chronic Diseases and Related Deaths, Mental Health (Depression/Suicide Rates), Asthma Hospitalization Rates, Preventable Hospitalizations, Oral Health, and Providers/Service Use.</p>	<p>The safety net review document will be finalized for inclusion in the HRSA Final Report, with interim versions as needed. DSWG efforts will assist in building on that draft, with health status elements and measures of provider availability and utilization. Included in the report to HRSA will be an update on the safety net segment of the SPG proposal, and an extrapolation of the effects on the current safety net of the selected strategies for 100% coverage. For instance, which group of providers that form the safety net will receive more business, which will be unaffected, and which will receive diminished business due to the affects of the proposed plan.</p> <p>Workforce shortages will play into the relationship between the safety net and the 100% coverage strategies chosen. Hospital-based services and specialty services are likely to keep increasing in cost because of the increased cost of retaining nurses and physicians. A recent report on "The Future Supply and Demand for Physicians in Michigan" was prepared for the Michigan State Medical Society (MSMS) by Public Policy Associates (June 2005).</p>

	Also discussed by the group were the approaching shortages in the healthcare workforce, especially physicians and nurses. It is of interest to discuss how these shortages will impact the future of the safety net.	
Review of Handouts	The "course-pack" for this meeting included a recent report on "The Nursing Agenda for Michigan: 2005-2010, Actions to Avert a Crisis", Kaiser Policy Report on proposed health program cuts by Bush's FY 2007 Budget Proposal, article on Michigan's physician shortage, and Governor Granholm's plan for addressing the rising cost of health care in Michigan, as expressed in her State of the State Address.	DSWG members were asked to review these additional materials. For instance, Bush's proposed FY 2007 budget cuts could have a significant impact on funding for FQHCs, and other safety net providers.
Meeting was adjourned at 4:30 pm		March meeting is scheduled for March 14, 2006 at MPHI Interactive Learning Center, 2:30 – 4:30 pm.

Submitted by:

Umbrin Ateequi, MDCH  
March 9, 2006